

REMARKS

Claims 1-23 remain pending in this application, with claims 1, 14 and 19 being amended and new claims 22 and 23 being added by this response. Claims 1 and 14 have been amended to clarify that an image processor generates a display image including a first data window for displaying the specified laboratory results and a second navigation window displaying a date field and time field for each receiving laboratory message. The allocated visual attributes are displayed in the navigation window adjacent each date and time field and identify newly acquired laboratory test results. Claim 19 has been amended to correct a typographical error and to clarify that claim 19 is dependent on method claim 14. New claims 22 and 23 are added to further clarify the image processor generates a component display for displaying medical information for a plurality of patients. The allocated visual attributes are displayed in the component display and identify newly acquired laboratory test results of corresponding patients. Support for these amendments can be found throughout the specification and more specifically from Figures 3 and 4 and Page 7, line 18 to Page 11, line 31. Thus, it is respectfully submitted that no new matter has been added.

Rejection of Claims 1-9, 14, 15, and 18-21 under 35 USC § 102(e)

Claims 1-9, 14, 15, and 18-21 are rejected under 35 USC § 102(e) as being anticipated by Jacobus et al. (U.S. Pub. 2005/0209891).

The present invention provides an apparatus and method for displaying medical information derived from a plurality of sources. The apparatus includes a communication processor for acquiring medical parameters associated with a patient including patient laboratory test results. A processor collates acquired medical parameters for storage in a database and allocates visual attributes to the acquired medical parameters for identifying at least one of (a) newly acquired

laboratory test results and (b) patients associated with a particular care unit. A device searches the database of acquired medical parameters to find specific laboratory test results based on one or more of (a) a text string identifying a portion of a laboratory test name, (b) a patient identifier, and (c) a date, for displaying the acquired medical parameters and allocated visual attributes in a desired order. An image processor generates a display image including a first data window for displaying the specified laboratory results and a second navigation window displaying a date field and time field for each received laboratory message. The allocated visual attributes are displayed in the navigation window adjacent each date and time field and identify newly acquired laboratory test results. Claims 1 and 14 each include similar features to those discussed above and thus all arguments apply to both of these claims.

The present claimed invention is concerned with enabling “a care giver to easily access, view, or determine the results of multiple medical test or other data associated with the patient” (Page 2, lines 4-6). Accordingly, the present claimed invention allocates an attribute “to distinguish newly acquired or non-reviewed laboratory test results from older laboratory tests that a user has previously acknowledged...Additional medical information associated with patients [are]...display[ed] in a composite window [, such as for]...a particular care unit” (Page 3, lines 3-14). More specifically, “lab results field 470 provides an indication of whether any lab results have been collected by the system for a particular patient and allocates an attribute to distinguish newly acquired lab results that have not yet been reviewed by a user” (Page 15, lines 21-24).

Jacobus et al. describe a system wherein medical records, clinical observations and medical imagery are organized and aggregated into a common database, enabling the data to be viewed and updated (See abstract). Specifically, data can be uploaded or updated by users or instruments. If updated by instruments, a Clinical Observation and Analysis System (COA) is used to collect and format the data ([0051]). Additionally, Jacobus provides that proprietary data may be decoded and encrypted for transfer over public carriers and decrypted for later storage thereof.

The Office Action asserts that Jacobus disclose allocating an attribute identifying newly acquired laboratory results or patients associated with a particular care unit, as Jacobus briefly mentions organizing and aggregating user uploaded data into the common database. The applicant respectfully disagrees. Jacobus provides that when the database is updated by instruments, the uploaded data is organized and aggregated by the COA system ([0053]). When updated in the clinical interface, various summary reports are created to keep track of online data stored in the system as necessary for proper management ([0057]). However, both methods of organization and aggregation of uploaded data described by Jacobus do not disclose the principles of the present claimed invention. Specifically, both methods do not disclose or suggest providing an image processor for generating a display image including a first data window for displaying the specified laboratory results and a second navigation window displaying a date field and time field for each receiving laboratory message. Furthermore, both methods described by Jacobus do not disclose providing visual attributes associated with each of the corresponding laboratory results that have not been reviewed to allow a user to quickly ascertain potentially new laboratory results. Thus, Jacobus neither disclose nor suggest “allocated visual attributes being displayed in the navigation window adjacent each date and time field and identifying newly acquired laboratory test results” as recited in the present claimed invention.

Additionally, Jacobus describes that physicians can be notified of new patient data by email, phone, fax, pager or US mail ([0203-0209]). However, this is wholly unlike the present claimed invention, which allocates visual attributes to acquired medical parameters to identify either new laboratory results or the patient care unit. Specifically, the notification described by Jacobus is not a visual attribute. Even if one were to consider the notification described by Jacobus a visual attribute, the attribute is not allocated to the acquired medical parameters as in the present claimed invention. Rather, the visual attribute is sent out alone via the specified medium. Furthermore, the notification described by Jacobus is sent directly to the physician using the specified medium. This is wholly unlike the present claimed invention, which allocates

Application No. 09/992,991 Attorney Docket No. 2000P09056US01
visual attributes for display. Highlighting new medical results to a physician is of substantial value since it may indicate an emergency medical problem requiring immediate intervention. This advantage and the problem it addresses is not recognized or contemplated in Jacobus.

Therefore, it is respectfully submitted that Jacobus neither disclose nor suggest “a processor for collating acquired medical parameters for storage in a database and allocating visual attributes to the acquired medical parameters for identifying at least one of (i) newly acquired laboratory test results and (ii) patients associated with a particular care unit” as recited in the present claimed invention.

Therefore, as Jacobus provides no 35 USC 112 compliant enabling disclosure of each feature of claims 1 and 14, it is respectfully submitted that Jacobus does not anticipate the present invention as claimed in claims 1 and 14. As claims 2-9, 15 and 18-21 are dependent on independent claims 1 and 14 respectively, it is respectfully submitted that claims 2-9, 15 and 18-21 are patentable for the same reasons as discussed above in regards to claims 1 and 14. Consequently, it is respectfully requested that the rejection of claims 1-9, 14, 15 and 18-21 under 35 USC 102(e) be withdrawn.

Rejection of Claims 10-13, 16 and 17 under 35 USC § 103(a)

Claims 10-13, 16 and 17 are rejected under 35 USC § 103(a) as being unpatentable over Jacobus et al. (U.S. Pub. 2005/0209891) in view of Cairnes (U.S. 6,139,494).

Cairnes describes a medical diagnosis system that provides outpatient healthcare delivery and information to users. Symptom data is received and analyzed according to case management rules. Cairnes further generates patient information and develops a therapeutic program that is selectively updateable. However, Cairnes, similarly to Jacobus, neither disclose nor suggest “an image processor for generating a display image including a first data window for displaying the

Application No. 09/992,991

Attorney Docket No. 2000P09056US01

specified laboratory results and a second navigation window displaying a date field and time field for each receiving laboratory message” and “allocated visual attributes being displayed in the navigation window adjacent each date and time field and identifying newly acquired laboratory test results” as recited in the present claimed invention. Accordingly, Cairnes neither discloses nor suggests “a processor for collating acquired medical parameters for storage in a

database and allocating visual attributes to the acquired medical parameters for identifying at least one of (a) newly acquired laboratory test results and (b) patients associated with a particular care unit” and “a device for searching said database of acquired medical parameters to find specific laboratory test results based on one or more of (a) a text string identifying a portion of a laboratory test name, (b) a patient identifier, and (c) a date, for display of the acquired medical parameters and allocated visual attributes in a desired order” as recited in the present claimed invention.

Applicant respectfully submits that there is also no reason or motivation to combine the system disclosed by Jacobus with the system disclosed by Cairnes. Specifically, Jacobus merely discloses a medical data aggregation system that centralizes patient information and allows for easy access of this information (see Jacobus, para. [0018]). Contrary to both Jacobus and the claimed invention, Cairnes describes a system for providing outpatient care that provides an outpatient with a therapeutic program based on predetermined management rules. The treatment program described in Cairnes is produced by data obtained and analyzed by the system according to these management rules to produce a treatment program. Jacobus merely aggregates the data and provides access to the data over the Internet. Therefore, these systems are intended to accomplish entirely unrelated objectives and provide no common problem recognition. Thus, it is respectfully submitted that it would not have been obvious to combine the systems of Jacobus and Cairnes.

Even if there was a motivation to combine the systems of Jacobus and Cairnes, the combined system would not produce the present claimed invention. Instead, the system resulting

from the above combination would yield a system that organizes and aggregates patient information into a common database and provides an outpatient with a therapeutic program based on predetermined management rules. This is wholly unlike the present claimed invention and provides no common problem recognition with the present claimed invention. Specifically, it is respectfully submitted that the combination, similarly to the individual systems of Jacobus and Cairnes, neither discloses nor suggests “an image processor for generating a display image

including a first data window for displaying the specified laboratory results and a second navigation window displaying a date field and time field for each receiving laboratory message” and “allocated visual attributes being displayed in the navigation window adjacent each date and time field and identifying newly acquired laboratory test results” as recited in the present claimed invention. It is further respectfully submitted that the combination, similarly to the individual systems of Jacobus and Cairnes, neither discloses nor suggests “a processor for collating acquired medical parameters for storage in a database and allocating visual attributes to the acquired medical parameters for identifying at least one of (a) newly acquired laboratory test results and (b) patients associated with a particular care unit” and “a device for searching said database of acquired medical parameters to find specific laboratory test results based on one or more of (a) a text string identifying a portion of a laboratory test name, (b) a patient identifier, and (c) a date, for display of the acquired medical parameters and allocated visual attributes in a desired order” as recited in present claimed invention. Consequently, it is respectfully submitted that claims 1 and 14 are patentable over the cited references when taken alone or in combination. As claims 10-13, 16, and 17 are dependant on independent claims 1 and 14 respectively, it is respectfully submitted that claims 10-13, 16, and 17 are patentable for the same reasons as discussed above in regards to claims 1 and 14. Thus, it is respectfully submitted that this rejection is satisfied and should be withdrawn.

Having fully addressed the Examiner's rejections, it is believed that, in view of the preceding amendments and remarks, this application stands in condition for allowance. Accordingly then, reconsideration and allowance are respectfully solicited. If, however, the

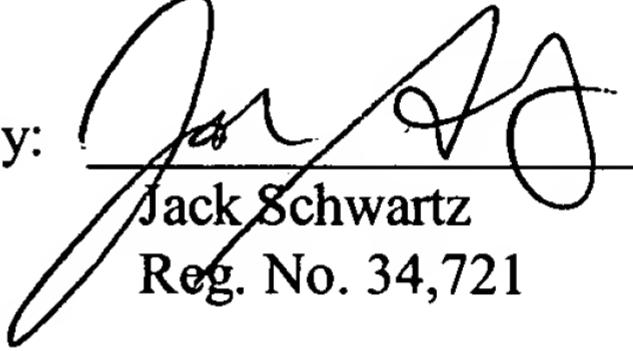
Application No. 09/992,991

Attorney Docket No. 2000P09056US01

Examiner is of the opinion that such action cannot be taken, the Examiner is invited to contact the applicant's attorney at the phone number below, so that a mutually convenient date and time for a telephonic interview may be scheduled.

No additional fee is believed due. However, if a fee is due, please charge the additional fee to Deposit Account 50-2828.

Respectfully submitted,
Mark Penny et al.

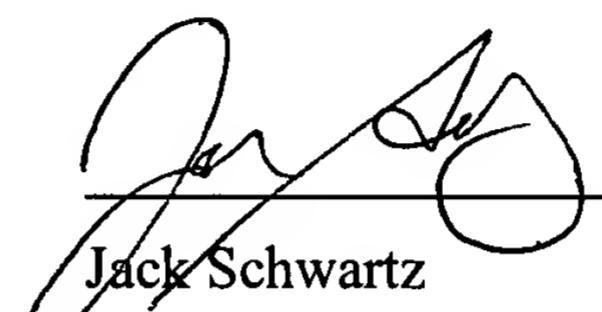
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CERTIFICATE OF MAILING

I hereby certify that this amendment is being deposited with the United States Postal Service as First Class Mail, postage prepaid, in an envelope addressed to Mail Stop Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on

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